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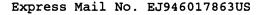
PTO/SB/01 (12-97)

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DECLARATION FOR LITHITY OR	Attorney Docket Number	LE9-00-081			
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Beaven, Joseph Damon			
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number				
☐ Declaration ☐ Declaration Submitted OR Submitted after Initial	Filing Date				
	Group Art Unit				
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name				

As a below named invent	or, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Data Management System and Method for Peripheral Devices								
the specification of which (Title of the Invention) is attached hereto OR								
	was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
			0000	0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) Filing Date	e (MM/DD/YYYY)	numbe supple	onal provisional application ers are listed on a mental priority data sheet SB/02B attached hereto.				
I hereby claim the benefit u	nder 35 U.S.C. 119(e) of an	y United States provisional	Addition Addition number supple	ed below. onal provisional application ers are listed on a mental priority data sheet				

[Page 1 of 2]
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Post Office Address

Lexington State

X Additional inventors are being named on the





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USA

Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent **Parent Patent Number** Parent Filing Date Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto. As a named inventor, I hereby appoint the following registered practioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: X Customer Number 021972 Place Customer Number Bar Code Label here Registered practitioner(s) name/registration number listed below Registration Registration Name Name Number Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: X Customer Number Correspondence address below 021972 or Bar Code Label Name Address Address City State 71P Country Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Beaven Joseph Damon Inventor's Date Signature USA exington Residence: City Countr Citizenship 3286 Pimlico Pkwy Post Office Address

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
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Given Name (first and middle [if any])		Family Name or Surname						
				·-				
Inventor's Signature					Date			
Residence: City	State		Country		Citizenship			
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